



**CRIMINAL JUSTICE PROGRAMS DIVISION
GOVERNOR'S OFFICE OF EMERGENCY SERVICES**

P.O. BOX 419047
RANCHO CORDOVA, CALIFORNIA 95741-9047
(916) 324-9100
FAX: 327-5674



June 1, 2004

Alvis Johnson, Chairman
Karuk Tribe of California
P.O. Box 1016
Happy Camp, CA 96039

Dear Chairman Johnson:

The Governor's Office of Emergency Services (OES), Criminal Justice Programs Division is pleased to announce the release of the American Indian Children's Tribal Court Program Request for Application (RFA).

The two existing OES funded American Indian Children's Tribal Court Planning projects, the Karuk Tribe of California, and the Morongo Band of Mission Indians, are eligible to receive funding under this program through a recommendation made to OES by the Children's Justice Act (CJA) Task Force.

A hard copy of the RFA is enclosed. A copy can also be obtained from website, www.oes.ca.gov by following these steps: select Criminal Justice Programs Division, RFA Funding Information, and look under RFAs Available.

The grant period will begin July 1, 2004, and end June 30, 2005. This is the first year of a three-year funding cycle; funding is contingent upon satisfactory performance and subject to the availability of CJA federal funds, which fund this program.

A total of \$150,000 has been allocated to this program for the current grant year. OES will fund the two existing projects at \$75,000 each.

The application should be received or postmarked by 5:00 p.m. on Wednesday, June 30, 2004. Instructions for sending or hand delivering the application are included in the RFA.

Should you have questions, please contact Lisa Fey-Williams at (916) 324-9190.

Sincerely,

GILLSA MILLER, Chief
Children's Section

cc: April Attebury, Tribal Court Administrator

Enclosure



**CRIMINAL JUSTICE PROGRAMS DIVISION
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June 1, 2004

Maurice Lyons, Tribal Chairman
Morongo Band of Mission Indians
11581 Potrero Road
Banning, CA 92220

Dear Chairman Lyons:

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GILLSA MILLER, Chief
Children's Section

Enclosure

**GOVERNOR'S OFFICE OF EMERGENCY SERVICES
CRIMINAL JUSTICE PROGRAMS DIVISION**

**AMERICAN INDIAN CHILDREN'S
TRIBAL COURT
REQUEST FOR APPLICATION**



June 2004

**GOVERNOR’S OFFICE OF EMERGENCY SERVICES
CRIMINAL JUSTICE PROGRAMS DIVISION**

**AMERICAN INDIAN CHILDREN’S TRIBAL COURT
REQUEST FOR APPLICATION**

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**GOVERNOR'S OFFICE OF EMERGENCY SERVICES
CRIMINAL JUSTICE PROGRAMS DIVISION**

**AMERICAN INDIAN CHILDREN'S TRIBAL COURT
REQUEST FOR APPLICATION**

PART I – INFORMATION

A. INTRODUCTION

This Request for Application (RFA) provides all of the information and forms necessary to prepare an application for the Governor's Office of Emergency Services (OES) grant funds. The terms and conditions described in this RFA supersede all previous RFAs and any conflicting provisions stated in the *Grantee Handbook*. However, the *Grantee Handbook* provides helpful information you may wish to consult while developing your application. A copy can be obtained from website, www.oes.ca.gov. Applicant can select "Plans and Publications, RFA/RFP Grantee Handbook" to access the *Grantee Handbook*.

B. CONTACT INFORMATION

Lisa Fey-Williams, M.S.W.
Criminal Justice Specialist
Children's Section
Tel: (916) 324-9190 Fax: (916) 327-5674
E-mail: Lisa.Fey-Williams@oes.ca.gov

Questions concerning this RFA, the application process, or programmatic issues, should be submitted by telephone, fax, or e-mail.

C. APPLICATION DUE DATE

To submit an application, applicant must deliver the application to OES **by 5:00 p.m.** on the due date, or mail the application postmarked by the due date.

The Due Date Is: June 30, 2004.

Applicant must submit **one original and one copy** of the application to:

Governor's Office of Emergency Services
Criminal Justice Programs Division
P.O. Box 419047
Rancho Cordova, CA 95741-9047
Attn: American Indian Children's Tribal Court RFA – Children's Section

or

If sending application by **overnight delivery**, submit to:

Governor's Office of Emergency Services
Criminal Justice Programs Division
3650 Schriever Avenue
Mather, CA 95655
Attn: American Indian Children's Tribal Court RFA – Children's Section

If the application will be **hand-delivered**, it should be delivered to the Governor's Office of Emergency Services at 1130 K Street, Suite 300, Sacramento. Please note the following: 1130 K Street is located at the southwest corner of the intersection of 12th and K Streets. A Bank of America is located on the first floor of this building. Please note that K Street is a pedestrian mall. Indoor parking structures are located on the east side of 12th Street between K and L Streets (connected to the Hyatt Regency Hotel), and on 10th Street between K and L Streets. Street parking is limited and requires quarters for parking meters. Once you enter the building at 1130 K Street, take the elevator to the third floor and proceed straight down the hall to the Receptionist Office behind the double wooden doors labeled "State of California: Governor's Office of Emergency Services." The application will be date stamped and you may request a receipt.

D. ELIGIBILITY

The two existing OES American Indian Children's Tribal Court Planning projects are the only eligible applicants for this funding via this RFA: the Karuk Tribe of California and the Morongo Band of Mission Indians. The two eligible projects were previously awarded two-year planning grants, and are prepared to implement the American Indian Children's Tribal Court Program.

E. FUNDING CYCLE AND DURATION

1. Grant Award Period

The funding cycle for this program is three years, **beginning July 1, 2004 and ending June 30, 2007**. Each grant award period will be for twelve (12) months. The first grant award period **begins July 1, 2004, and ends June 30, 2005**. An application for continuation funding must be submitted for each year of funding. Continuation funding is contingent upon satisfactory performance and **subject to availability of Children's Justice Act (CJA) federal funds**.

2. Source of Funds

Grant funds allocated for the American Indian Children's Tribal Court Program are derived from CJA federal funds.

3. Allocation of Funds

OES has allocated \$300,000 of federal CJA funds for the American Indian Children's Tribal Court Program for Fiscal Year (FY) 2004/05. Of the allocation, \$150,000 will fund the two currently funded projects which have had the American Indian Children's Tribal Court Planning grants; \$75,000 each to the Morongo Band of Mission Indians and the Karuk Tribe of California. Through a separate competitive RFP, the remaining \$150,000 was slated for funding two Children's Tribal Court Program projects at \$75,000 each.

4. Use of Funds

CJA federal funds must be used to improve the investigation, prosecution, and judicial handling of cases of child abuse and neglect. The overall goal of the CJA is to reduce systemic trauma to children who are victims of child abuse, sexual abuse and exploitation, and preserve the rights of all parties involved in the investigation of such cases.

F. PROGRAM INFORMATION

1. Funding Background

The Children's Justice Act (CJA) is supported by the Federal Crime Victim's Fund, an amalgamation of fines and fees collected from defendants convicted of federal crimes. The Crime Victim's Fund is administered by the United States Department of Justice, Office of Victims of Crime (OVC). CJA grants are awarded by the Administration on Children, Youth, and Families, United States Department of Health and Human Services, as authorized by Section 107 of the Child Abuse Prevention and Treatment Act (CAPTA), as amended, October 3, 1996. Recipient states must be eligible for the CAPTA Basic State Grant and establish and maintain a multi-disciplinary task force on children's justice.

The CJA Task Force (Task Force) is a requirement for California's eligibility to receive the federal funds. This Task Force is comprised of professionals throughout California who have knowledge and expertise in the areas of criminal justice and child abuse, including investigation of child physical abuse, child neglect, child sexual abuse and exploitation, and child maltreatment-related fatalities. The Task Force is responsible for making policy and training recommendations to the state regarding improvements and reform to the way suspected child abuse cases are handled.

OES is the administering agency for the CJA grant funds. The CJA is a federal program charged with identifying the need for systematic changes in the area of investigating child abuse. The federal funds provide grants to states to improve the investigation, prosecution, and judicial handling of cases of child abuse and neglect. Since 1993, CJA funds have supported numerous programs throughout California and propelled much needed change in the systems response to child abuse. Child fatality cases involving suspected child abuse or neglect also meet CJA criteria.

Grantees must comply with Public Law 103-227, Part C – Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994, which requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted by an entity and used routinely or regularly for the provision of health, day care, education or library services to children under the age of 18, if the services are funded by federal programs either directly or through state or local governments. Federal programs include grants, cooperative agreements, loans or loan guarantees, and contracts.

2. Program Intent and Need

While State-Tribal Agreements provide American Indian Tribes control over a range of child welfare services, it is advantageous to the tribes to establish a children's tribal court as it provides tribal control of their child welfare cases as intended by the passage of the Indian Child Welfare Act (ICWA). The establishment of a children's tribal court will clearly delineate responsibilities held by the individual counties and those held by the tribal social services. It is anticipated duplication of services and confusion over jurisdictional responsibilities will be eliminated; gaps in services to Indian children will be filled; delays will be reduced; services will be culturally appropriate to the needs of Indian children; and fewer out-of-home placements may result.

The goal of the American Indian Children's Tribal Court Program is to assist California American Indian tribes, consortiums of federally recognized tribes, or councils of federally recognized tribes to establish a children's justice system to serve American Indian minors-in-need-of-care.

3. Program Elements

The following are important elements of a children's justice system for American Indian minors-in-need-of-care:

- **Continuing Education:** While an essential core element of the children's justice system for American Indian minors-in-need-of-care is a tribal court, the capability to make decisions regarding the care and custody of American Indian minors-in-need-of-care must be supported by child placement, child intervention, family support/reunification, and mental and physical health resources. Therefore, continuing education of trained staff, committed to quality services for American Indian minors-in-need-of-care, is essential.
- **Networking and Consultation:** Network and consult with essential county and state counterparts identified in the previous planning grant.
- **Ongoing Communication:** A successful program will require ongoing communication with California tribes which are operating children's courts, as well as states such as Oregon and Alaska, which are established Public Law 280 Tribal Court States. This will provide valuable exchange of information regarding effective tribal court implementation.
- **Addressing Liability Issues:** Overcoming the issue of liability for American Indian tribes to license and monitor their own foster homes is paramount to the successful implementation of a tribal court program in California. The project shall coordinate efforts to address the complexities of Indian tribes immunity from civil penalties and the responsibility for any tortuous act done by the tribe.
- **Providing Written Guidelines, Standards, Policies and Procedures:** Written guiding policies, standards, and procedures which establish safety protocols regarding minors served by the system, staff, and volunteers can reduce the risk of harm and lower liability risks, and can ensure all American Indian children served by the court system are treated uniformly.
- **Researching Possible Funding Sources:** Financial support for the entire system is a core necessity for program success.
- **Establishing an Appropriate Model:** Establish an American Indian Children's Tribal Court Program model appropriate for the community's needs and the cultural aspects of those served. A formal process of decision-making relating to child placement homes and other supportive services are essential core elements for a successful program, but the design may vary among tribal entities. For example, a tribal court may be based on the concepts of mediation and consensus building or it may be based on reliance on the wisdom of an appointed group, such as tribal elders, or it may be founded in the adversarial model of a judge and two opposing advocates arguing on behalf of their clients.
- **Passing on Knowledge:** Pass on knowledge gained from the planning process to other projects funded under the American Indian Children's Tribal Court Program.

G. PREPARING AN APPLICATION

For clarity, the forms in Part III include an Application Cover Sheet. Please complete the Application Cover Sheet and attach it to the front of the application.

The following five components are required for a complete application:

- Application Cover Sheet,
- Grant Award Face Sheet (Form A301),
- The Project Narrative,
- The Budget Narrative and Project Budget (Forms A303a-c), and
- The Application Appendix.

**GOVERNOR'S OFFICE OF EMERGENCY SERVICES
CRIMINAL JUSTICE PROGRAMS DIVISION**

**AMERICAN INDIAN CHILDREN'S TRIBAL COURT
REQUEST FOR APPLICATION**

PART II – INSTRUCTIONS

The instructions in this section correspond to each of the application components, as well as to the forms provided in Part III.

Applicant must use the forms provided or computer-generated forms, and plain 8½" x 11" white paper for the project narrative sections. If computer-generated forms are used, they must duplicate the OES forms.

Application must be typed with characters no smaller than standard 12-pitch font. **Applicant must double-space all narrative sections of the application.**

Copies of the application must be assembled separately and individually fastened in the upper left corner. **Do not bind application.**

A. THE PROJECT NARRATIVE

The project narrative is the main body of information describing the problem to be addressed, the plan to address that problem through appropriate and achievable objectives and activities, and the ability of the applicant to implement the plan.

1. Problem Statement

Provide a narrative description of the problem in the applicant's service area to be addressed by the project. Describe each of the following topics:

- Describe the impact of the two-year planning grant on the current status of cases involving American Indian minors-in-need-of-care cases.
- Describe the service area, location, population, economic, demographic, social factors, and the population to be served;
- Identify incidences of American Indian minors-in-need-of-care cases currently in the designated service area;
- Describe how county and state agencies coordinate the services for American Indian children and their families;
- Describe current policies and procedures in place, which would streamline the investigative and court process;
- Describe the obstacles interfering with the local court's ability to adequately serve this population of child abuse victims;
- Indicated why current resources may or may not be meeting the needs of American Indian minors-in-need-of-care cases;
- Describe how the project will benefit American Indian minors-in-need-of-care in the project area; and
- Identify the differences in handling American Indian child welfare cases, which would result from the implementation of the program.

2. Plan and Implementation

The applicant is required to submit a plan describing implementation of each of the mandatory objectives. The applicant must provide quantifiable measures for each objective and describe in detail how the objectives will be accomplished, including specific activities supporting the objectives. In addition, the applicant must describe the documentation procedures and source documents that will be used to demonstrate the objective is being achieved.

Objective 1:

- a) Assess the needs of the children and families to be served within the first three months of FY 2004/05.
- b) Describe the documentation procedures and source documents the applicant will use to demonstrate this objective is being achieved.

Objective 2:

- a) Hire or have operational agreements in place for trained key personnel who will manage and implement the American Indian children's tribal court justice system within the first month of FY 2004/05.
- b) Describe the documentation procedures and source documents the applicant will use to demonstrate this objective is being achieved.

Objective 3:

- a) Hire or have operational agreements in place for personnel who will support key personnel and implement the American Indian children's tribal court justice system within the first three months of FY 2004/05.
- b) Train new personnel within the first six months of their hire date.
- c) Describe the documentation procedures and source documents the applicant will use to demonstrate this objective is being achieved.

Objective 4:

- a) Provide ongoing training and/or continuing education for all personnel assigned to the grant.
- b) Describe the documentation procedures and source documents the applicant will use to demonstrate this objective is being achieved.

Objective 5:

- a) Continue to develop linkages with organizations to provide collateral services.
- b) Strengthen or maintain existing linkages with organizations providing collateral services.
- c) Describe the documentation procedures and source documents the applicant will use to demonstrate this objective is being achieved.

Objective 7:

- a) Continue to investigate funding sources for the various American Indian children's justice system components.
- b) Describe the documentation procedures and source documents the applicant will use to demonstrate this objective is being achieved.

Objective 8:

- a) Receive American Indian minors-in-need-of-care cases in the American Indian Children's Tribal Court children's justice system.
- b) Describe the documentation procedures and source documents the applicant will use to demonstrate this objective is being achieved.

Objective 9:

- a) Provide comprehensive intervention services to selected American Indian children and their families.
- b) Describe the documentation procedures and source documents the applicant will use to demonstrate this objective is being achieved.

3. Agency Description

- Describe the applicant agency, including: size, composition, primary mission, philosophy, range and focus of services, and the role of the project within the agency.
- Describe the duties, responsibilities, time commitments, and qualifications of staff assigned to the project.
- Describe current efforts and projects being implemented by the applicant agency which are similar in design or intent to the American Indian Children's Tribal Court Program described in this RFA.

4. Organizational Chart

- Provide a copy of the applicant agency's current organizational chart, illustrating the proposed American Indian Children's Tribal Court Program within the agency's organizational structure.
- Describe the organizational qualifications to successfully implement the project. Discuss important achievements, including previous project successfully undertaken by the organization. Include a narrative description of working relationships with other agencies. Describe available financial resources to implement placement and other child welfare services for American Indian minors-in-need-of-care once they are under the jurisdiction of the tribal court. If no financial resources are available for this purpose, applicants can meet this objective by entering into a State-Tribal Agreement with State of California Department of Social Services to become eligible for funds.

5. Operational Agreements

- List the agencies which will participate in this project and describe how the project will coordinate activities with them. Provide copies of the applicant agency's current or proposed signed Operational Agreement (OA) or Memorandum of Understanding (MOU) with the proposed partner agencies, demonstrating the cooperative relationship and collaborative implementation of the proposed American Indian Children's Tribal Court Program. The OAs/MOUs must be signed and dated for FY 2004/005.

6. Evaluation

- Describe how the applicant agency will evaluate the American Indian Children's Tribal Court Program's implementation in the target area and its impact on the population served.
- Describe the applicant agency's ability to participate in an OES administered or sponsored programmatic evaluation, including available personnel, funds, and resources.

- Provide a statement of the applicant agency's willingness and intent to cooperate with future evaluation efforts by OES or its designee.

B. THE PROJECT BUDGET

The purpose of the Project Budget is to demonstrate how the project will implement the proposed plan with the funds available through this program. Project costs must be directly related to the objectives and activities of the project. The budget must cover the entire grant period. In the budget, include **only** those items covered by grant funds, including match funds when applicable. Projects may supplement grant funds with funds from other sources. However, since all approved line items are subject to audit, applicant should not include in the project budget matching funds (if applicable) in excess of the required match. All budgets are subject to OES modifications and approval.

OES requires the applicant to develop a **line item** budget that will enable them to meet the intent and requirements of the program, ensure the successful implementation of the project, and be cost-effective. Failure of the applicant to include required items in the budget does not exclude responsibility to comply with those requirements during the implementation of the project. The applicant should refer to the *Grantee Handbook* at www.oes.ca.gov. Applicant can select "Plans and Publications, RFA/RFP Grantee Handbook" for additional information concerning OES budget policy or to determine if specific proposed expenses are allowable. Contact the person listed on page 1, subsection B of this RFA if you have additional budget questions.

1. The Budget Narrative

Applicant is required to submit a narrative with the project budget. The narrative must be typed and placed in the application in front of the budget pages. In the narrative describe:

- How the project's proposed budget supports the stated objectives and activities in the project.
- How funds are allocated to minimize administrative costs and support direct services.
- The duties of project-funded staff, including any qualifications or education level necessary for the job assignment.
- How project-funded staff duties and time commitments support the proposed objectives and activities.
- Proposed staff commitment/percentage of time to other efforts, in addition to this project.
- The necessity for subcontracts and any unusual expenditures.
- Mid-year salary range adjustments.

2. Specific Budget Categories

There is a separate form in the Forms Section (Part III) for each of the following three budget categories:

- Personal Services – Salaries/Employee Benefits,
- Operating Expenses, and
- Equipment.

Each budget category requires line item detail that addresses the method of calculation and justification for the expense. Enter the amount of each line item in the right hand column of the Budget Category form. All charges must be clearly documented **and rounded off to the nearest whole dollar**. Enter the total amount of the budget category at the bottom of the form. If additional pages are needed, total only the last page of each budget category.

The bottom of the Equipment Category form contains a format for identifying the project total and fund distribution. This section must be completed and submitted even if there are no line items identified in the equipment category.

a. Personal Services – Salaries/Employee Benefits (Form A303a):

1) Salaries

Personal services include all services performed by staff who are directly employed by the applicant and must be identified by position and percentage of salaries. All other persons are to be shown as consultants in the Operating Expenses Category supported by a MOU, contract, or OA, which must be kept on file by the grantee and made available for review during an OES site visit, monitoring visit, or audit. Furthermore, in the case of grants being passed through a grantee to be operated by another agency, the staff from the second agency will be shown in the Operating Expenses Category. In either case, they may be salaried or hourly, full-time or part-time positions. Sick leave, vacation, holidays, overtime, and shift differentials must be budgeted as salaries. If agency personnel have accrued sick leave or vacation time prior to the approval of grant funding, they may not take that time off using project funds.

2) Benefits

Employee benefits must be identified by type and percentage of salaries. Applicant may use fixed percentages of salaries to calculate benefits. Budgeted benefits cannot exceed those already established by the applicant.

Employer contributions or expenses for social security, employee life and health insurance plans, unemployment insurance, and/or pension plans are allowable budget items. Other benefits, such as uniforms or California Bar Association dues, are allowable budget items if negotiated as a part of an employee benefit package.

A line item is required for each different position/classification, but not for each individual employee. If several people will be employed full-time or part-time in the same position/classification, provide the number of full-time equivalents (e.g., three half-time clerical personnel should be itemized as 1½ clerical positions).

b. Operating Expenses (Form A303b):

Operating expenses are defined as necessary expenditures exclusive of personnel salaries, benefits and equipment. Such expenses may include specific items directly charged to the project, and in some cases, an indirect cost allowance. The expenses

must be grant-related (e.g., to further the program objectives as defined in the grant award), and be encumbered during the grant period.

The following items fall within this category: consultant services such as subcontractors who are not employed by the applicant, travel, office supplies, training materials, research forms, equipment maintenance, software equipment rental/lease, telephone, postage, printing, facility rental, vehicle maintenance, answering service fees, and other consumable items. Furniture and office equipment with an acquisition cost of less than \$1,000 per unit (including tax, installation, and freight) **and/or with a useful life of less than one year fall within this category.**

c. Equipment (Form A303c):

Equipment is defined as nonexpendable tangible personal property having **a useful life of more than one year** and an acquisition cost of \$1,000 or more per unit (including tax, installation, and freight).

A line item is required for each different type of equipment, but not for each specific piece of equipment (e.g., three laser jet printers must be one line item, not three).

C. THE APPLICATION APPENDIX

The Application Appendix provides OES with additional information from the applicant to support components of the application. The following must be included:

- Operational Agreements: OAs must be dated and contain original signatures, titles, and agency names for both parties. This document must demonstrate a formal system of networking and coordination with other agencies and the project. Those submitted with the application must be effective for the proposed grant year. For the purpose of this RFA, the terms OA and MOU are synonymous. A sample OA is provided in the Forms section of this RFA.
- Project Service Area Information,
- Project Contact Information,
- Project Summary,
- Other Funding Sources,
- Additional Signature Authorization (*if applicable*),
- Programmatic Purchase Justification (*if applicable*),
- Sole/Single Source Justification – Contracts for Services Checklist (*if applicable*), and
- Sole Source Justification – Contracts for Goods Checklist (*if applicable*).

**GOVERNOR'S OFFICE OF EMERGENCY SERVICES
CRIMINAL JUSTICE PROGRAMS DIVISION**

**AMERICAN INDIAN CHILDREN'S TRIBAL COURT
REQUEST FOR APPLICATION**

PART III – FORMS

CHECKLIST AND REQUIRED SEQUENCE

This checklist is provided to assist the applicant in ensuring that a complete application is submitted to OES.

- ☐ APPLICATION COVER SHEET
- ☐ GRANT AWARD FACE SHEET – Signed by the official authorized to enter into Grant Award Agreement.
- ☐ CERTIFICATE OF ASSURANCE OF COMPLIANCE
- ☐ THE PROJECT NARRATIVE
 - Problem Statement
 - Plan and Implementation
- ☐ THE PROJECT BUDGET
 - The Budget Narrative
 - Budget Forms – Forms A303a, A303b, A303c
- ☐ THE APPLICATION APPENDIX
 - Operational Agreements
 - Project Service Area Information
 - Project Contact Information
 - Project Summary
 - Other Funding Sources
 - Additional Signature Authorization (*if applicable*)
 - Programmatic Purchase Justification (*if applicable*)
 - Sole/Single Source Justification – Contracts for Services Checklist (*if applicable*)
 - Sole Source Justification – Contracts for Goods Checklist (*if applicable*)



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GOVERNOR'S OFFICE OF EMERGENCY SERVICES**

P.O. BOX 419047
RANCHO CORDOVA, CA 95741-9047
(916) 324-9100
FAX: 327-5674



APPLICATION COVER SHEET

RFA PROCESS

AMERICAN INDIAN CHILDREN'S TRIBAL COURT RFA

Deliver to Children's Section

Submitted by:

(Place name, address, and phone number of applicant here.)

GRANT AWARD FACE SHEET INSTRUCTIONS

1. **Administrative Agency**
Enter the complete name of the unit of government applying for funding (e.g., Alameda County, City of Fresno), also referred to as the “grantee.”
2. **Implementing Agency**
Enter the complete name of the agency responsible for the day-to-day operation of the grant (e.g., Sheriff, Police Department), and the contact person’s name, address, and phone number. Include an e-mail address, if you have one.
3. **Project Title**
Enter the complete title of the project. Do not use acronyms. Do not exceed 60 characters, including spaces and punctuation.
4. **Project Director**
Enter the name, title, mailing address, and telephone number of the individual ultimately responsible for the project. This information must be limited to four lines.
5. **Financial Officer**
Enter the name, title, mailing address, and telephone number of the person who will be responsible for all fiscal matters relating to the project. This person must be someone other than the project director. The reimbursement check for this project will be mailed to the address shown for the financial officer. This information must be limited to four lines.
6. **Award Number**
Leave blank (to be completed by OES).
7. **Grant Period**
Enter beginning and ending dates of funding as specified in the grant application instructions.
8. **Federal Amount**
If applicable, enter the amount of federal funds requested for the project. The amount must be consistent with the proposed budget. If not applicable, enter N/A.
9. **State Amount**
If applicable, enter the amount of state funds requested for the project. If not applicable, enter N/A.
10. **Cash Match**
If applicable, enter the amount of cash match. The amount must be consistent with the proposed budget. If not applicable, enter N/A.
11. **In-Kind Match**
If applicable, enter the amount of in-kind match. The amount must be consistent with the proposed budget. If not applicable, enter N/A.
12. **Total Project Cost**
Enter the sum of items 8, 9, 10, and 11. The amount must be consistent with the proposed budget.
13. **Official Authorized to Sign for Applicant/Grantee**
Enter the signature, name, title, address, and telephone number of the official authorized to enter into the Grant Award Agreement for the city/county or community-based organization, as stated in the language between items 12 and 13 of the Grant Award Face Sheet (Form A301). **Provide an original signature of the authorized official in blue ink.**

**GOVERNOR'S OFFICE OF EMERGENCY SERVICES
CRIMINAL JUSTICE PROGRAMS DIVISION**

GRANT AWARD FACE SHEET (FORM A301)

The Governor's Office of Emergency Services, hereafter designated OES, hereby makes a grant award of funds to the following

Administrative Agency (1) _____

hereafter designated Grantee, in the amount and for the purpose and duration set forth in this grant award.

(2) Implementing Agency Name _____

Contact _____ **Address** _____

E-mail address _____ **Telephone ()** _____

(3) Project Title (60 characters maximum)	(6) Award No.
(4) Project Director (Name, Title, Address, Telephone, E-mail) (five lines maximum)	(7) Grant Period
	(8) Federal Amount
	(9) State Amount
(5) Financial Officer (Name, Title, Address, Telephone, E-Mail) (five lines maximum)	(10) Cash Match N/A
	(11) In-Kind Match N/A
	(12) Total Project Cost

This grant award consists of this title page, the application for the grant which is attached and made a part hereof, and the Assurance of Compliance forms which are being submitted. I hereby certify that: (1) I am vested with authority to, and have the approval of the City/County Financial Officer, City Manager, or Governing Board Chair, enter into this grant award agreement; and (2) all funds received pursuant to this agreement will be spent exclusively on the purposes specified. The grant recipient signifies acceptance of this grant award and agrees to administer the grant project in accordance with the statute(s), the Program Guidelines, the *Grantee Handbook*, and the OES audit requirements, as stated in this RFP or RFA. The grant recipient further agrees to all legal conditions and terms incorporated by reference in this RFP or RFA.

<p style="text-align:center"><u>FOR OES USE ONLY</u></p> <p>Item: _____</p> <p>Chapter: _____</p> <p>PCA No.: _____</p> <p>Components No.: _____</p> <p>Project No.: _____</p> <p>Amount: _____</p> <p>Split Fund: _____</p> <p>Split Encumber: _____</p> <p>Year: _____</p> <p>Fed. Cat. #: _____</p> <p>Match Requirement: _____</p> <p>Fund: _____</p> <p>Program: _____</p> <p>Region: _____</p>	<p>(13) Official Authorized to Sign for Applicant/Grant Recipient</p> <p>Signature: _____</p> <p>Name: _____</p> <p>Title: _____</p> <p>Address: _____</p> <p>Telephone: () _____</p> <p>E-mail address _____</p> <p>Date: _____</p> <hr/> <p>I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.</p> <hr/> <p>_____ Fiscal Officer, Date</p> <hr/> <p>_____ Director, Date</p>
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CERTIFICATION OF ASSURANCE OF COMPLIANCE

I, _____, hereby certify that:
(official authorized to sign grant award; same person as line 13 on Grant Award Face Sheet)

GRANTEE: _____

IMPLEMENTING AGENCY: _____

PROJECT TITLE: _____

is responsible for reviewing the *Grantee Handbook*¹ and adhering to all of the Grant Award Agreement requirements (state and/or federal) as directed by OES including, but not limited to, the following areas:

I. **Equal Employment Opportunity – (*Grantee Handbook Section 2151*)**

It is the public policy of the State of California to promote equal employment opportunity by prohibiting discrimination or harassment in employment because of race, religious creed, color, national origin, ancestry, disability (mental and physical) including HIV and AIDS, medical condition (cancer and genetic characteristics), marital status, sex, sexual orientation, denial of family medical care leave, denial of pregnancy disability leave, or age (over 40). **OES-funded projects certify that they will comply with all state and federal requirements regarding equal employment opportunity, nondiscrimination and civil rights.**

Please provide the following information:

Affirmative Action Officer: _____

Title: _____

Address: _____

Phone: _____

Email: _____

II. **Drug-Free Workplace Act of 1990 – (*Grantee Handbook Section 2152*)**

The State of California requires that every person or organization awarded a grant or contract shall certify it will provide a drug free workplace.

III. **California Environmental Quality Act (CEQA) – (*Grantee Handbook Section 2153*)**

The State of California requires all OES-funded projects to obtain written certification that the project is not impacting the environment negatively.

¹The *Grantee Handbook* can be obtained from www.oes.ca.gov. Applicant can select “Plans and Publications, RFA/RFP Grantee Handbook” to access the *Grantee Handbook*.

IV. Lobbying – (*Grantee Handbook Section 2154*)

OES grant funds, grant property, or grant funded positions shall not be used for any lobbying activities, including, but not limited to, being paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal grant or cooperative agreement.

V. Debarment and Suspension – (*Grantee Handbook Section 2155*)

(This applies to federally funded grants only.)

OES-funded projects must certify that it and its principals are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of federal benefits by a state or federal court, or voluntarily excluded from covered transactions by any federal department of agency.

VI. Proof of Authority from City Council/Governing Board

The above-named organization (applicant) accepts responsibility for and will comply with the requirement to obtain written authorization from the city council/governing board in support of this program. The applicant agrees to provide all matching funds required for said project (including any amendment thereof) under the Program and the funding terms and conditions of OES, and that any cash match will be appropriated as required. It is agreed that any liability arising out of the performance of this Grant Award Agreement, including civil court actions for damages, shall be the responsibility of the grant recipient and the authorizing agency. The State of California and OES disclaim responsibility of any such liability. Furthermore, it is also agreed that grant funds received from OES shall not be used to supplant expenditures controlled by the city council/governing board.

The applicant is required to obtain written authorization from the city council/governing board that the official executing this agreement is, in fact, authorized to do so. The applicant is also required to maintain said written authorization on file and readily available upon demand.

All appropriate documentation must be maintained on file by the project and available for OES or public scrutiny upon request. Failure to comply with these requirements may result in suspension of payments under the grant or termination of the grant or both and the grantee may be ineligible for award of any future grants if the OES determines that any of the following has occurred: (1) the grantee has made false certification, or (2) violates the certification by failing to carry out the requirements as noted above.

CERTIFICATION

I, the official named below, am the same individual authorized to sign the Grant Award Agreement [line 13 on Grant Award Face Sheet], and hereby swear that I am duly authorized legally to bind the contractor or grant recipient to the above described certification. I am fully aware that this certification, executed on the date and in the county below, is made under penalty of perjury under the laws of the State of California.

Authorized Official's Signature: _____

Authorized Official's Typed Name: _____

Authorized Official's Title: _____

Date Executed: _____

Federal ID Number: _____

Executed in the City/County of: _____

AUTHORIZED BY:

- City/County Financial Officer
- City Manager
- Governing Board Chair

Signature: _____

Typed Name: _____

Title: _____

**THE PROJECT NARRATIVE
GOES HERE**

No standard forms are provided for the Project Narrative.

See Instructions in Part II of this RFA for details.

THE PROJECT BUDGET
THE BUDGET NARRATIVE
GOES HERE

No standard forms are provided for the Budget Narrative.

See Instructions in Part II of this RFA for details.

BUDGET CATEGORY AND LINE ITEM DETAIL	
A. Personal Services – Salaries/Employee Benefits	COST
TOTAL	

Form A303a

BUDGET CATEGORY AND LINE ITEM DETAIL	
B. Operating Expenses	COST
TOTAL	

Form A303b

BUDGET CATEGORY AND LINE ITEM DETAIL				COST
C. Equipment				
CATEGORY TOTAL				
PROJECT TOTAL				
FUND DISTRIBUTION	FEDERAL	STATE	CASH MATCH	IN-KIND MATCH
1. Amount of Funds				
2. Percentage of Funds				

Form A303c

THE APPLICATION APPENDIX
GOES HERE

See Instructions in Part II of this RFA for details.

SAMPLE OPERATIONAL AGREEMENT

This Operational Agreement stands as evidence that the (applicant agency) and the (agency) intend to work together toward the mutual goal of providing maximum available assistance for crime victims residing in (jurisdiction). Both agencies believe that implementation of the (program) application, as described herein, will further this goal. To this end, each agency agrees to participate in the program, if selected for funding, by coordinating/providing the following services:

The (applicant agency) project will closely coordinate the following services with the (agency) through:

- Project staff being readily available to (agency) for service provision through (describe arrangements with the agency);
- Regularly scheduled meetings (how often) between (persons/positions) to discuss strategies, timetables and implementation of mandated services.

* Specifically:

* List specific activities that will be undertaken between the two agencies or other specifics of the agreement.

We, the undersigned, as authorized representatives of (applicant agency) and (agency), do hereby approve this document.

For _____

For _____

Date _____

Date _____

PROJECT SERVICE AREA INFORMATION

1. COUNTY OR COUNTIES SERVED: Enter the name(s) of the county or counties served by the project. Put an asterisk where the principal office of the project is located.
2. POPULATION OF SERVICE AREA: Enter the total population of the service area served by the project.

PROJECT CONTACT INSTRUCTIONS

1. Provide the name, title, address, telephone number, and e-mail address for the person having day-to-day responsibility for the project.
2. Provide the name, title, address, telephone number, and e-mail address for the person to whom the person listed in #1 is accountable.
3. Provide the name, title, address, telephone number, and e-mail address for the Chief Executive of the implementing agency.
4. Provide the name, title, address, telephone number, and e-mail address for the financial officer for the project.
5. Provide the name, title, address, telephone number, and e-mail address for the project director for the project.
6. Provide the name, title, address, telephone number, and e-mail address for the Chair of the Governing Body of the implementing agency.

PROJECT CONTACT INFORMATION

Applicant: _____ Grant Number _____
(FOR OES USE ONLY)

Provide the name, title, address, telephone number, and e-mail address for the project contact persons named below. **If a section does not apply to your project, enter "N/A."**

1. The **person** having **day-to-day responsibility** for the project:

Name:	Title:	
Address:	City:	Zip:
Telephone Number: ()	Fax Number: ()	
E-Mail Address:		

2. The **person** to whom the person listed in **#1 is accountable**:

Name:	Title:	
Address:	City:	Zip:
Telephone Number: ()	Fax Number: ()	
E-Mail Address:		

3. The **executive director** of a nonprofit organization or the **chief executive officer** (e.g., chief of police, superintendent of schools) of the implementing agency:

Name:	Title:	
Address:	City:	Zip:
Telephone Number: ()	Fax Number: ()	
E-Mail Address:		

4. The **financial officer** for the project:

Name:	Title:	
Address:	City:	Zip:
Telephone Number: ()	Fax Number: ()	
E-Mail Address:		

5. The **project director** for the project:

Name:	Title:	
Address:	City:	Zip:
Telephone Number: ()	Fax Number: ()	
E-Mail Address:		

6. The **chair** of the **governing body** of the implementing agency: *(Provide address and telephone number other than that of the implementing agency.)*

Name:	Title:	
Address:	City:	Zip:
Telephone Number: ()	Fax Number: ()	
E-Mail Address:		

PROJECT SUMMARY INSTRUCTIONS

All of the necessary project information must be placed on the form in the space allowed. **Additional pages may not be added.** This is a summary of the project narrative.

1. **PROJECT YEAR:** If the project is new, check new. If the project is continuing, check the box of the proposed year of the project (i.e., Year 2) or insert the year of operation.
2. **PROJECT TITLE:** Enter the complete title. The title **MUST** describe the focus of the project. Acronyms are not acceptable. Do not exceed 60 characters, including space and punctuation.
3. **GRANT PERIOD:** Enter the beginning and ending dates of funding as specified in the grant application.
4. **APPLICANT:** Enter the name and complete address of the organization that is applying for the grant.
5. **FUNDS REQUESTED:** Enter the amount of grant funds requested. This must be the same amount used on the budget pages and on the application cover sheet.
6. **IMPLEMENTING AGENCY:** Enter the agency or organization designated on the Grant Award Face Sheet as the programmatic recipient of the grant funds who will accomplish the planned objectives and program goals.
7. **PROGRAM DESCRIPTION:** Provide a description of the specific area of service which OES is authorized to fund based upon state or federal legislation.
8. **PROBLEM STATEMENT:** Describe the problem the project will address. Support the problem with data such as number of offenses, description of the target area, and local needs.
9. **OBJECTIVES:** Include the quantifiable measurements which define a course of action in order to accomplish the program goals.
10. **ACTIVITIES:** Describe activities you will perform to accomplish each objective (quantify where possible).
11. **CATEGORY:** Check the appropriate category.
12. **PROGRAM AREA:** Check appropriate program area.
13. **EVALUATION:** Describe how project performance will be measured. Note who will conduct the evaluation (e.g., project staff, government personnel, or outside consultants).
14. **NUMBER OF CLIENTS TO BE SERVED:** Enter the number of clients.
15. **PROJECTED BUDGET:** List all noted budget items. Be specific in breakdown of grant funds and all other budget sources.

PROJECT SUMMARY		
1. PROJECT YEAR New Year 2 Year 3 Other _____	2. PROJECT TITLE	3. GRANT PERIOD _____ to _____
4. APPLICANT Name: _____ Phone: () Address: _____ Fax #: ()		5. FUNDS REQUESTED \$ _____
6. IMPLEMENTING AGENCY Name: _____ Phone: () Fax #: () Address: _____		
7. PROGRAM DESCRIPTION 		
8. PROBLEM STATEMENT 		
9. OBJECTIVES 		

10. ACTIVITIES 	11. CATEGORY _ TC _ _ _
13. EVALUATION 	12. PROGRAM AREA _ Siskiyou County _ Humbolt County _ Riverside County _ San Bernardino County _ Other _____ _ Other _____
14. NUMBER OF CLIENTS TO BE SERVED _____	

15. PROJECTED BUDGET

	Personnel Services	Operating Expenses	Equipment	TOTAL
Funds Requested				
Other Grant Funds				
Other Sources (list in-kind, fees, etc.).....				

16. NAME OF RESPONSIBLE OFFICIAL

Signature: _____

Date: _____

Typed Name: _____

Title: _____

Complete this form to report the total funds available to support the activities related to accomplishing the goals and objectives of the Grant Award Agreement. In the Grant Funds column, report the OES funds requested by category. In the Other Funds column, report all other funds available to support the project by category and then calculate the totals by category in the Program Total column. Total each column to arrive at the total program funds available.

OTHER FUNDING SOURCES			
BUDGET CATEGORY	GRANT FUNDS <i>(Use only the grant funds identified in the preceding budget pages.)</i>	OTHER FUNDS	PROGRAM TOTAL
Personal Services			
Operating Expenses			
Equipment			
TOTAL			

Form 653

This form does not become part of the grant award.

ADDITIONAL SIGNATURE AUTHORIZATION INSTRUCTIONS

Applicant may request signature authority in addition to the designated Project Director and/or Financial Officer by completing an Additional Signature Authority form and submitting it with the Grant Award Forms package. Space is provided for the addition of up to five (5) additional authorizations for the Project Director or Financial Officer.

No single individual may be authorized to sign for both the Project Director and the Financial Officer. **By signing the bottom of this form, the Project Director and/or Financial Officer authorize the person(s) identified on the form to act on their behalf on all grant-related matters.**

ADDITIONAL SIGNATURE AUTHORIZATION

Grant Award #: _____

Applicant: _____

Project Title: _____

Grant Period: _____ to _____

The following persons are authorized to sign for:

Project Director

Signature

Name

Signature

Name

Signature

Name

Signature

Name

Signature

Name

Financial Officer

Signature

Name

Signature

Name

Signature

Name

Signature

Name

Signature

Name

Approved By:

Project Director: _____

Date

Financial Officer: _____

Date

Regional/Local
Planning Director: _____

Date

**GOVERNOR'S OFFICE OF EMERGENCY SERVICES
CRIMINAL JUSTICE PROGRAMS DIVISION**

PROGRAMMATIC PURCHASE JUSTIFICATION

As stated in the *Grantee Handbook*, approval for purchases of computers and automated equipment is contingent on the project's ability to demonstrate cost effective, project-related need. This is best demonstrated by clearly relating each computer system or component to the grant objectives and activities.

- A. In narrative form, please answer the following questions. Attach as many pages as necessary to fully answer each question.
1. What is your agency's purpose for the proposed system? Include a description of the items to be purchased and how they will be used. Also, explain how the proposed equipment and/or software will enhance the project's ability to achieve the objectives/activities of the project as specified in the Grant Award Agreement.
- B. If the request is for hardware and software in which the total costs exceed \$10,000, answer the following questions:
1. Describe the proposed design of your system and indicate whether this is a new system or an addition/enhancement of an existing one. In your description please be specific as to type and location of hardware/software and how the system will be operated and maintained.
 2. Will the proposed system design meet not only your current, but future needs? Describe in detail.
 3. Does the proposed system integrate with others within the agency? Explain both yes and no responses in detail.
 4. Do you plan on integrating this system with existing city, county, regional or statewide networks? Explain both yes or no responses in detail.
 5. For criminal justice agencies, does the proposed system meet the minimum requirements of the Statewide Integrated Narcotics System (SINS)? Contact OES for additional information regarding SINS requirements.
 6. Does the proposed system include intelligence data subject to 28 CFR Part 23 (2003)? Contact California Department of Justice at (916) 263-1182, Western States Information Network regarding these requirements and have them sign the certification of compliance.

**SOLE/SINGLE SOURCE JUSTIFICATION
CONTRACTS FOR SERVICES**

CHECKLIST

Has the applicant/grantee met the following requirements of the *Grantee Handbook*:

Section 4510

Yes

No

Do conditions exist that require a sole/single-source contract?

☐☐

Section 4521

Is a brief description of the program or project included?

☐☐

Section 4522

Was it necessary to contract noncompetitively?

☐☐

Did the contractor submit his/her qualifications?

☐☐

Is the reasonableness of the cost justified?

☐☐

Were cost comparisons made with differences noted for similar services?

☐☐

Section 4523

Is an explanation provided for the uniqueness of the contract?

☐☐

Section 4524

Are there time constraints impacting the project?

☐☐

Is a justification provided regarding the need for contract?

☐☐

Were comparisons made to identify the time required for another contractor to reach the same level of competence?

☐☐

**SOLE SOURCE JUSTIFICATION
CONTRACTS FOR GOODS
CHECKLIST**

Has the applicant/grantee met the following requirements of the *Grantee Handbook*:

Section 3510

Yes

No

Do conditions exist that require a sole/single-source contract?

☐☐

Section 3520

Is a brief description of the program or project included?

☐☐

Was it necessary to contract noncompetitively?

☐☐

Did the contractor submit his/her qualifications?

☐☐

Is the reasonableness of the cost justified?

☐☐

Were cost comparisons made with differences noted for similar services?

☐☐

Is an explanation provided for the uniqueness of the contract?

☐☐

Are there time constraints impacting the project?

☐☐

Is a justification provided regarding the need for contract?

☐☐

Were comparisons made to identify the time required for another contractor to reach the same level of competence?

☐☐